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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2009 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		Docket Number (Optional) 273012011800	
Application Number                      10/081,010		Filed                      February 15, 2002	
For      METHOD FOR REDUCING OR PREVENTING PDT RELATED INFLAMMATION			
Art Unit              1612		Examiner                      Z. Fay	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.			
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):			
		<u>Fee</u>	<u>Small Entity Fee</u>
<input type="checkbox"/>	One month (37 CFR 1.17(a)(1))	\$130	\$65                      \$ _____
<input checked="" type="checkbox"/>	Two months (37 CFR 1.17(a)(2))	\$490	\$245                      \$ 490.00
<input type="checkbox"/>	Three months (37 CFR 1.17(a)(3))	\$1110	\$555                      \$ _____
<input type="checkbox"/>	Four months (37 CFR 1.17(a)(4))	\$1730	\$865                      \$ _____
<input type="checkbox"/>	Five months (37 CFR 1.17(a)(5))	\$2350	\$1175                      \$ _____
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.			
<input type="checkbox"/> A check in the amount of the fee is enclosed.			
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.			
<input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.			
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>03-1952</u> .			
<b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>			
I am the	<input type="checkbox"/> applicant/inventor.		
	<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71.		
	<input type="checkbox"/> Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).		
	<input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>54,403</u>		
	<input type="checkbox"/> attorney or agent under 37 CFR 1.34.		
	Registration number if acting under 37 CFR 1.34      _____		
_____ Signature		_____ November 5, 2010 Date	
_____ Typed or printed name		_____ (858) 314-7692 Telephone Number	

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 1 forms are submitted.